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TRUSTEES OF THE FREEHOLDERS AND COMMONALTY OF THE TOWN OF EAST HAMPTON

P.O. Box 7073, Amagansett, NY 11930 Phone: (631)267-8688 Fax: (631) 267-2064

PERMIT APPLICATION INSTRUCTIONS

- 1. No work or other activity covered by this application may be undertaken on Trustee Property before the Trustees have granted their approval. Applicants must carefully review the Trustees Rules and Regulations prior to completing and submitting this application.
- 2. This application must be fully completed, legibly in ink or printed, and all of its requirements complied with. If a question is not applicable, so indicate by entering "NA". The completed application must be submitted to the Office of the East Hampton Town Trustees located on Bluff Road in Amagansett.
- 3. This application must be signed by the owner of the upland property to be benefited, improved or in any manner served by the proposed project as well as by the person, firm or cooperation by whom the work is to be performed as permit will only be issued to property owners.
- 4. This application must consist of and be accompanied with the following:
 - A) **COMPLETED APPLICATION**: Three (3) copies of this completed application form.
 - B) **APPLICATION FEE**: An application fee in the amount of \$60.00 for new applications (non-refundable) and \$30.00 for a renewal (non-refundable). Checks should be made payable to the East Hampton Town Trustees. Only one (1) renewal of any application will be considered. After one (1) renewal, a new application must be submitted

- C) **PLANS**: Three (3) blueprint copies of the plan illustrating the proposed layout and construction of the project. These plans shall be drawn to scale and describe in detail all of the work to be performed and the materials to be used.
- D) **SURVEY**: Three (3) blueprint copies of a current survey prepared by a licensed surveyor, certified to the East Hampton Town Trustees, drawn to scale and showing in detail:
 - i) All property lines with directional bearings and distances, the property's relationship to adjoining premises and public streets.
 - ii) The nature, size and location of any of the following natural features within two hundred feet (200') of the boundary lines of the property and/or contained wholly or partially on the site: Beaches, Beach Grass, Bluffs, Dunes, Tidal Waters, Watercourses and Wetlands, all as defined in Chapter 153-1-20 of the East Hampton Town Code.
 - iii) Accurate depth soundings of all water bodies or channels in which construction or dredging is proposed.
 - iv) Cultural features such as buildings, existing shoreline structures on and adjacent to the site, trails, etc...
- E) **VERIFICATION**: The attached two (2) verification forms must be signed, dated and notarized; or if it cannot be truthfully sworn to, an explanation must accompany this application stating fully why it cannot be sworn to.

F) ADDITIONAL NOTES:

- The submission of an accurate thorough application with all necessary information supplied is a prerequisite to the processing of the application. An incomplete application will be returned to the applicant.
- ii) An undertaking secured by certified check or other acceptable security may be required to guarantee the performance of the proposed project in accordance with the terms and conditions of the permission granted by the Trustees. The Trustees may also require the applicant to secure an adequate comprehensive public liability policy protecting the Board of Trustees from liability due to damage to persons or property resulting from or arising in connection with said project.
- iii) In addition to the permission of the Trustees, permits for the proposed action may be required by other agencies, e.g. Army Corps of Engineers, Department of Environmental Conservation, or any agencies of the Town of East Hampton.

Form TTE-1 Revised 6/04/08



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www.trustees.easthamptonny.gov

PERMIT APPLICATION

1.	APPLICATION FOR (Check all that apply):				
	Bulkhead Repair				
	Dock (Re-)Construction				
	Dock Repair	Dredging			
	Dune Restoration	Excavation			
	Filing	C 1!			
	Phragmite Removal	Renovation			
	Revetment Repair	~ 1-			
	Stairway				
	Other(explain):				
	b) Location Information				
3.	APPLICANT INFORMATION:				
٠.	a) Owner:				
	Mailing Address:				
	G				
	-				
	Physical				
	Address:				
	Telephone #:				

	b) Applicant (if other than owner):		
	Mailing Address:		
		Telephone #:	
	c)	Attorney or Agent:	
		Mailing Address:	
		Telephone #:	
	d)	Construction Company:	
		Mailing Address:	
		Telephone #:	
	e)	Surveyor and/or Engineer:	
		Mailing Address:	
		Telephone #:	
4.	CORRES	SPONDENCE to be sent to: (specify a-e above)	
5. PURPOSE : In detail, explain project. Add additional sheets if necessary.			

6.	ENCUMBRANCES: Are there any encumbrances on the property, particularly right-of-way easements or use restrictions? Yes No		
7.	TITLE: Does applicant or predecessor in title own adjacent property? YesNo		
	If yes, give description and state when this parcel came into separate ownership.		
8.	ADJACENT PROPERTY OWNERS : Provide the names and addresses of abutting owners and owners directly across adjourning street (including those in othe municipalities). It is suggested that you contact the Town Assessor's Office to obtain this information.		
9.	ADDITIONAL INFORMATION:		
	a) If this is an application for routine maintenance, is it to: Repair or replace an existing coastal structure Maintenance Dredge		
	b) If dredging, state number of cubic yards to be dredged Location of proposed dredge spoil site		

c)	Any other pertinent information to the consideration of this application	

IMPORTANT VERIFICATION

THE SUBMISSION OF AN ACCURATE, THOROUGH APPLICATION WITH ALL NECESSARY INFORMATION SUPPLIED IS A PREREQUISITE TO THE PROCESSING OF THE APPLICATION. AN INCOMPLETE APPLICATION WILL BE RETURNED TO THE APPLICANT FOR COMPLETION.

AN UNDERTAKING SECURED BY CERTIFIED CHECK OR OTHER ACCEPTABLE SECURITY MAY BE REQUIRED TO GUARANTEE THE PERFORMANCE OF THE PROPOSED PROJECT IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE PERMISSION GRANTED BY THE TRUSTEES. THE TRUSTEES MAY REQUIRE THE APPLICANT TO SECURE AN ADEQUATE COMPREHENSIVE PUBLIC LIABILITY POLICY PROTECTION THE BOARD OF TRUSTEES FROM LIABILITY DUE TO DAMAGE TO PERSONS OR PROPERTY RESULTING FROM OR ARISING IN CONNECTION WITH SAID PROJECT.

STATE OF NEW YORK) COUNTY OF SUFFOLK) ss: _____, being duly sworn disposes and says (s)he is the applicant/agent for the property above described; that all statements made in this application are true to the best of his/her knowledge; that the attached or accompanying map and/or sketches are accurate; and that (s)he has read the notices contained in this application, understands the same and agrees to abide thereby; and that the project which is subject of this application will be carried out in accordance with the duly adopted rules and regulations of the East Hampton Town Trustees and in accordance with the terms and conditions set forth by the Trustees in their decision and in accordance with all applicable laws. Signature of Applicant Date STATE OF NEW YORK, COUNTY OF SUFFOLK ss: On the _____day of _____in the year 20____ before me, the undersigned personally _____ personally known to me or proved to me on the basis appeared_ of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her capacity(ies), and that by his/her/their signature(s) on the instrument, the instrument, the individual(s), or persons on behalf of which the individual(s) acted, executed the instrument, and that such individual made such an appearance before the undersigned in the

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(Insert the city or other political subdivision and state or county or other place the acknowledgment was taken.)

Date	Notary Public
IMPORTAN	T VERIFICATION
STATE OF NEW YORK) COUNTY OF SUFFOLK) ss:	
epresentations made by the applicant pursua project which is the subject of this application	, being duly sworn deposes and say described; that the person, company or firm o so on my behalf. I agree to be bound by all ant to this application and I further agreed that the n will be carried out in accordance with the duly mpton Town Trustees and in accordance with all
Date	Signature of Owner
TATE OF DF	_, COUNTY _}ss:
	, in the year 20before me,
personally known to me or proved to me on the individual(s) whose name(s) is (are) subscribe that he/she/they executed the same in his/ignature(s) on the instrument, the individual-	the basis of satisfactory evidence to be the sed to the within instrument and acknowledged to her/their capacity(ies), and that by his/her/their
Insert the city or other political subdivision and state or cou	unty or other place the acknowledgment was taken.)
 Date	Notary Public